(d) if so, the details thereof and Government's reaction thereto?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) Yes, Sir. The Government is already providing free antiretroviral treatment facilities to HIV/AIDS patients through 25 selected government hospitals at present and it is planned to expand the facility in a phased manner.The provision of free drugs for treatment of opportunistic infections is already being provided through all the medical college and district hospitals.

(c) and (d) USAID is assisting NACO in NACP-II through implementation of USAID assisted APAC & AVERT project. The cost outlay of APAC is Rs. 64.58 crores and AVERT project is 16.0 crores. The project period of APAC project 2002-2007 and AVERT is 2000-2007, but this is not for treatment but other activities.

Japan is not providing any asistance under NACP-II for treatment of AIDS.

Indian Organ Transplant Act

4748. SHRIVI JAY J. DARDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are proposing to amend the Indian Human Organ Transplant Act of 1994 to fall it in line with global Jaws so that Indian patients do not have to go to such countries for Organ Transplantation where it is permitted under their laws; and

(b) whether the Government are also thinking of considering acceding to dying patients' pleas for permitting them to donate their organs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) A Committee has been constituted by the Government on the directions of Hon'ble High Court of Delhi (as per the judgement dated 6.9.2004 in W.P. No. 813/2004) to review the provisions of the Transplantation of Human Organs Act, 1994 and the Transplantation of Human Organs Rules, 1995. The composition of the Committee and terms of reference are enclosed as Statement (See below).

(b) Under the Transplantation of Human Organs Act, 1994 donation of human organs is permitted through live related and un-related donor. However, un-related donors require permission of Authorisation Committee.

The removal of organs from a brain stem dead person is permitted on the basis of a certificate given by the Brain Stem Death Committee as per the provisions under Sub Section (6) of section 3 of the said Act.

Statement

Composition of the Committee and terms of reference

The Composition of the Committee is as follows:—

1. Dr. S.Y Quaraishi, Addl. Secretary & DG, National AIDS Control Organisation (Nominee of Secretary (Health and Convenor)
2. Prof. S.N. Mehta, Head of Department, Surgery Department, AIIMS-(member)
3. Dr. Harsh Johri, Renal Surgeon, Sir Ganga Ram Hospital, Delhi—(Member)
4. Secretary, Indian Medical Association, I.R Estate, New Delhi—(Member)
5. Mr. Sanjay Jain, Advocate, Chamber No. 488, New Chambers Block, Delhi High Gourt, New Delhi—(Member)
6. Dr. V.K. Arora, Addl. DG—(Member Secretary)

Terms of reference of the committee constituted as per the judgement dated September 6th, 2004 in W.P. No. 813/2004 of high court of Delhi to review the provisions of the transplantation of human organs Act, 1994 and the transplantation of human organs Rules, 1995

1. Based on the data available on the transplantation of organs and the working of the Authorisation Committees, the Committee to examine and make its recommendations on the composition of Authorisation Committees and changes, if any, required to ensure timely permissions.
2. Whether the jurisdiction of the Authorisation Committees should be enlarged by bringing within its ambit the process of certifying a "near relative" or the task be assigned to another designated authority?
3. Review the provisions of the Act and Rules based on the experience of transplantation of organs as carried out and the difficulties arising due to the bottlenecks faced in the said process. The Committee to examine in particular

provisions of Section 9 and requirement of carrying out the tests prescribed in Rule 4, certification in Form-3 to review the definition of "near relative" and make its recommendations in the light of the observations made.

4. examine and specify the organs for transplantation of which the tests prescribed in Rule 4(1)(c) to establish the factum of being "near relative" need not be carried out when other evidence is available.
5. Examine the feasibility of establishing and setting up Organ Procurement Organizations with data bank to facilitate the dissemination of information on availability of organs for transplantation to encourage organ donation especially from cadavers, cases of brain stem deaths and other deceased persons, who had authorized removal of organs upon demise.
6. Examine the feasibility of creation of a fund, the corpus to be provided partly come from the Union of India and partly by levying a fixed charge on the total bill of the hospital for transplantation and/or public donations, for providing social incentives to a donor.
7. Examine and recommend ways and means to give such incentives, including but not limited to help and aid any preferred health care, recognition and honour to a donor in the community.
8. Examine the causes that lead to exploitation of poor and unaware persons in the process of organ donation and Suggest methods to reduce, control and ultimately eradicate such malpractices Recommend programmes for dissemination of correct information of ethical, legal and devising procedure concerning organ donation so that a conducive atmosphere is generated and disinformation and misgivings are dispelled.
9. Any other matter relevant to the subject.

Government's various health programme

4749. SHRI NANA DESHMUKH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the details of the specific items relating to Ministry of Health and Family Welfare that find place in the Government's Common Minimum Programme;